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FORM D

SEC Mail Processing Section

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

MAY 12 2008

FORM D

OMB APPROVAL OMB Number: 3235-0076 Expires: May 31,2008 Estimated average burden hours per response. . . . . 16.00

SEC USE ONLY DATE RECEIVED

Washington, DC

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR** 

Name of Offering (☐ check if this is an amendment und name has changed, and indicate change.)  Issuance of Convertible Prom ssory Notes with V/arrants  Iting Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☑ Rule 506 ☐ Section 4(6)  Type of Filing: ☑ New Filing ☐ Amendment	ULOE
A. BASIC IDENTIFICATION DATA	
. Enter the information requested about the issuer	
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)	08043634
SG Holdings, Inc.	
Address of Executive Offices (Number and Street, City, State, Zip Code) 31 Abrams Road, Cheshire, CT 06410	Telephone Number (Including Area Code) 203-915-0757
Address of Principal Business Operations (Number and Street, City, State, Zip Code) if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business healthcare insurance management services	3
Type of Business Organization	PROCESSED
	PROCESSED  MAY 2 0 2008
Month Year  Actual or Estimated Date of Incorporation or Organization: [0]4 [0]8 ☑ Actual ☐ Estivarisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	mated THOMEON
GENERAL INSTRUCTIONS	

77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United Status registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a toss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

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2. Enter the information re	•	=			
		uer has been organized wi			
					class of equity securities of the issuer.
<ul> <li>Each executive off</li> </ul>	icer and director of	f corporate issuers and of o	corporate general and man	aging partners of p	artnership issuers; and
<ul> <li>Each general and n</li> </ul>	nanaging partner o	f partnership issuers.			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, it Glover, Paul	f individual)				
Business or Residence Addre c/o ISG Holdings, Inc., 8	ss (Number and 1 Abrams Road,	Street, City, State, Zip Co Cheshire, CT 06410	de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i Ditman, Steven	f individual)				
Business or Residence Addre	ss (Number and Abrams Road,	Street, City, State, Zip Co Cheshire, CT 06410	de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	de)	<del></del>	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ess (Number and	Street, City, State, Zip Co	de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	findividual)	4.4			
Business or Residence Addre	ess (Number and	Street, City, State, Zip Co	ode)		
Check Box(cs) that Apply:	Promoter	Beneficial Owner	Executive Offices	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)	<del></del>			
Business or Residence Addre	ess (Number and	Street, City, State, Zip Co	ode)	<del></del>	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Office:	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)	<u> </u>			
Business or Residence Addre	ess (Number and	Street, City, State, Zip Co	ode)		

					15.7 <b>.1</b> . 1	VECEVA T	(ON ABOÙ	ŢŎĔFERI	YG TELL				
t.	Has the	issuer sold	l, or does th	ne issuer in	itend to se	ll. to non-a	ccredited i	nvestors in	this offeri	ng?		Yes	No Œ
••		100001	.,			Appendix.						F-w	
2.	What is	the minim	um investm								***************************************	\$n	/a 
												Yes	No
3.			permit joint										X
4.	commission of states	sion or sim on to be lis s, list the na	ion request ilar remune ted is an ass ime of the b you may s	ration for s sociated pe roker or de	olicitation rson or ago aler. If mo	of purchase int of a brok ore than five	ers in conne (er or deale e (5) persor	ection with r registered is to be list	sales of sec with the S ed are asso	curities in t EC and/or	he offering. with a state		
Ful	i Name (i	Last name	first, if indi	vidual)									
Bus	siness or	Residence	Address (N	lumber and	f Street, C	ity, State, Z	Lip Code)			·- <u></u>		<del></del>	
Nar	me of Ass	sociated Br	oker or De	aler		<del></del>							
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Bus	siness or	Residence	Address (?	Number an	d Street, C	City, State,	Zip Code)			·	<del></del> .		
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Nai	me or Ass	SOCIAIÇO DI	roker or De	aici									
Sta	tes in Wh	ich Person	Listed Has	s Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	s" or check	individual	States)	(**************************************		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		*************	*************	☐ AI	1 States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	MD NC VA	MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	ID MO PA PR
Ful	Name (	Last name	first, if ind	ividual)									
Bu	siness or	Residence	: Address (?	Number an	d Street, C	City, State,	Zip Code)	····		<del></del>			
Nai	me of Ass	sociated Br	oker or De	aler					·				<u></u>
Sta	tes in Wh	nich Person	Listed Has	s Solicited	or Intends	to Solicit	Purchasers				<del></del>		
	(Check	"All States	s" or check	individual	States)					**************		☐ AI	States
	AL TL MT	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR

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1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box $\square$ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
	Type of Security	Aggregate Offering Price	<del>.</del>	Amount Already Sold
	Debt	\$		\$
	Equity			\$
	Common Preferred		_	
	Convertible Securities (including warrants)	600,000.00	)_	300,060.00 \$
	Partnership Interests	<u></u>		s
	Other (Specify)			\$
	Total	600,000.00	)	s 300,060.00
	Answer also in Appendix, Column 3, if filing under ULOE.			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			
		Number Investors		Aggregate Dollar Amount of Purchases  300,060,00
	Accredited Investors		_	\$_500,000.00
	Non-accredited Investors			3
	Total (for filings under Rule 504 cnly)		_	\$
	Answer also in Appendix, Column 4, if filing under ULOE.			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.			
	Type of Offering	Type of Security		Dollar Amount Sold
	Rule 505	_		\$
	Regulation A		_	s
	Rule 504		_	\$
	Total		_	\$ 0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees	*****		S
	Printing and Engraving Costs			s
	Legal Fees			\$_10,000.00
	Accounting Fees			\$
	Engineering Fees	***********		\$
	Sales Commissions (specify finders' fees separately)	**********		<b>s</b>
	Other Expenses (identify)			s
	Total	***********	Z	s 10,000.00

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80	C: OKTORING PEICE, NUMBER OF INVESTORS, EXPENSES NOUSE OF B	Merrio 1	
	b. Enter the difference between the aggregate offering price given in response to Part C — Question 1 and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer."		\$590,000.00
	Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above.		
		Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees	] <b>s</b> _	. 🗆 \$
	Purchase of real estate	] <b>\$</b>	. 🗆 \$
	Purchase, rental or leasing and installation of machinery and equipment	]\$	. 🗆 \$
	Construction or leasing of plant buildings and facilities		
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)		
	Repayment of indebtedness		
	Working capital	_ · ¬\$	\$ 590,000.00
	Other (specify):	] <b>s</b>	s
			. 🗆 \$
	Column Totals	\$ 0.00	\$ 590,000.00
	Total Payments Listed (column totals added)		00.000,00
	DIEDERAL SIGNATURE		20年生行和B
sien	issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice ature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commis information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of R	sion, upon writte	ile 505, the followin on request of its staf
	intermation furnished by the issue, to any non-advantage of the issue, the intermation furnished by the issue, the intermation furnished by the issue, the intermation furnished by the issue of the issue, the intermation furnished by the issue of the is		
		Date //	
ssu	er (Print or Type)		·/
Issu			/

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	A STATE SIGNATURE		
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No <b>K</b>
•	See Appendix, Column 5, for state response.		
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is f D (17 CFR 239.500) at such times as required by state law.	iled a no	tice on Form
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, informatissuer to offerees.	ion furn	ished by the
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entimited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer clair of this exemption has the burden of establishing that these conditions have been satisfied.	itled to ming the	the Uniform availability
The issu	er has read this notification and knows the contents to be true and has duly caused this notice to be signed on its beha	lf by the	undersigned
duly au	thorized person.		
Issuer (	Print or Type) Signature // Bate	//	/
ISG Ho	Idings, Inc.	K	
Name (	Print or Type) Title (Print or Type)	V	

**Chief Financial Officer** 

## Instruction:

Steven Ditman

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

	APPENDENCE CONTROL CON										
1	Intend to non-a investors	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		4  Type of investor and  amount purchased in State  (Part C-Item 2)						
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
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AK											
AZ											
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				APP	ÉNDIX				N. M.
Ī	Intend to non-a investor	I to sell eccredited s in State -Item I)	Type of security and aggregate offering price offered in state (Part C-Item 1)		4  Type of investor and amount purchased in State (Part C-Item 2)				ification te ULOE attach tion of granted)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
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1		2	3	ARP	NDIX	4		5		
	Intend to sell and aggregate to non-accredited investors in State (Part B-Item 1)  Type of security and aggregate offering price offered in state (Part C-Item 1)			Type of investor and amount purchased in State (Part C-Item 2)					Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
WY										
PR										

**END**